

LT7000171262

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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Certificates of Status _____

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M. MOON

AUG 10 2017

2017 AUG 10 PM 2:01

**CORPORATE
ACCESS,
INC.**

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PICK UP: 8-9-17

- ☐ CERTIFIED COPY _____ 17
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1. Esla LLC
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

ARTICLE OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I.

The name of the Limited Liability Company is:

ESLA LLC

ARTICLE II.

The address and street address of the principal office of the Limited Liability Company is:

1900 S TREASURE DRIVE UNIT 8R

NORTH BAY VILLAGE FL 33141

The mailing address of the Limited Liability Company is:

1900 S TREASURE DRIVE UNIT 8R

NORTH BAY VILLAGE FL 33141

ARTICLE III.

The purpose for which this Limited Liability Company is organized is:

Any and all lawful business.

ARTICLE IV.

The name and the Florida street address of the registered agent are:

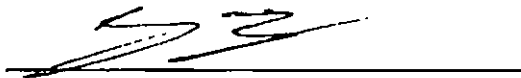
JACZKO, LASZLO

16400 NE 17TH AVE APT. 403

NORTH MIAMI BEACH FL 33162

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity.

I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.



Registered Agent's Signature

08/09/2017

Date:

ARTICLE V.

The name and address of each Manager or Managing Member is as follows:

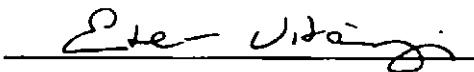
Name and Address:

Title: MGRM

VITANYI, ESZTER

1900 S TREASURE DRIVE APT. 8R

NORTH BAY VILLAGE FL 33141

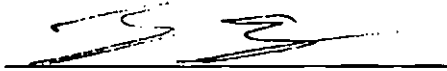


JACZKO, LASZLO

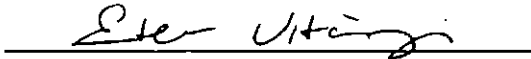
Title: MGRM

16400 NE 17TH AVE APT. 403

NORTH MIAMI BEACH FL 33162



In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155.F.S.



Signature of a member or an authorized representative of a member.

ESZTER VITANYI

Typed or printed name of signee

08/09/2017

Date